

# Indiana Trails Inventory Update Form

**Please complete a separate form for EACH trail being updated.**

Check One: ☐ Add to Inventory ☐ Change Information ☐ Delete from Inventory

**Name of Trail** \_\_\_\_\_ **Code number (if currently in inventory)** \_\_\_\_\_

**Managing Entity** \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Web Site Address** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

**Status of Trail** ☐ open \_\_\_\_\_ year opened ☐ under development ☐ planned

**Length of Trail** (miles, to nearest tenth) \_\_\_\_\_

**County in which trail is located** \_\_\_\_\_ **Town in which trail is located** \_\_\_\_\_

**Trail Surface** ☐ natural ☐ woodchips ☐ limestone  
☐ asphalt ☐ concrete ☐ other (specify) \_\_\_\_\_

**Designated Trail Use check all that apply**

<input type="checkbox"/> hiking	<input type="checkbox"/> off-road bicycle	<input type="checkbox"/> snowmobile	<input type="checkbox"/> canoe (river trail)
<input type="checkbox"/> exercise	<input type="checkbox"/> equestrian	<input type="checkbox"/> all-terrain vehicle	
<input type="checkbox"/> interpretive	<input type="checkbox"/> wheelchair	<input type="checkbox"/> motorcycle	<input type="checkbox"/> other _____ (please specify)
<input type="checkbox"/> road bicycle	<input type="checkbox"/> cross-country ski	<input type="checkbox"/> 4-wheel drive vehicle	

**Type of Trail** ☐ park/forest name of park/forest \_\_\_\_\_

☐ river trail ☐ rail trail ☐ other (specify) \_\_\_\_\_

**Please return this form to: Streams and Trails Section, Division of Outdoor Recreation, 402 W. Washington St., Rm. 271, Indianapolis, IN 46204. Phone: 317-232-4070. Fax: 317-233-4648. Email: [dbrier@dnr.state.in.us](mailto:dbrier@dnr.state.in.us)**

**\*\*\*To include the trail in the state trail inventory mapping and analysis (GIS), please attach a 1:24,000 USGS topographic quad map with the trail's location marked on it.**